Information on Scatter Cremains in Rocky Mountain National Park

Thank you for your inquiry into the scattering of ashes within Rocky Mountain National Park. A permit is required from the Chief Ranger's Office to scatter ashes in the park. There is no charge for the permit. The guidelines below need to be keep in mind when filling out the request:

- 1. There are no designated sites for scattering of ashes, but the location you choose must be away from developed areas (parking lots, trailheads, campgrounds, picnic areas) and at least 200 feet (70 adult steps) from any water source such as a lake or stream.
- 2. Discretion should be exercised in spreading ashes; doing so is generally a very private moment and care should be given not to disturb other park users.
- 3. Ashes should be spread about and not buried or placed in a pile.
- 4. No markers, cairns, displays, signs, or plaques may be placed in the park.
- 5. We suggest early in the morning as a good time of day for your memorial as the afternoons are usually more crowded and afford less privacy and solitude.

Once you receive the letter we ask that you keep it with you during your duration in the Park.

If you are unfamiliar with Rocky Mountain National Park, we have listed a few scenic areas to have a scattering of ashes ceremony. Recommended meadows: Upper Beaver Meadows, Mill Creek Basin, Moraine Park, or Horseshoe Park (note: seasonal closures). Recommended Areas on Trail Ridge Road (closed mid-October to June): Ute Trail, Medicine Bow Curve. You must still be 200 feet from water at these locations. Other sites may be requested; these are just a few recommendations.

Please fill out the request below to scatter ashes.

National Park Service Rocky Mountain National Park 1000 Highway 36, Estes Park, CO 80517 Office # (970) 586-1209, Fax # (970) 586-1352



Application for Special Use Permit - SCATTERING ASHES

Please supply the information requested below. Attach additional sheets, if necessary, to provide required information. You must allow sufficient time for the park to process your request; check with the park for guidelines. You will be notified of the status of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges. ** See attached sheet for additional information

Applicant Name:	Telephone #:
	Cell phone #:
	Fax#:
Street/Address:	Email:
City/State/ZipCode:	
Proposed activity:	
Preferred Date	Preferred Location
Alternate Date(s)	Alternate Location(s)
Alternatives will be considered if first choice is not available.	
Maximum Number of Participants	Maximum Number of Vehicles
List of equipment (i.e. tables, chairs, grills, sound system, etc.)	
Individual in charge of activity onsite (include cell phone number) and authorized to make decisions related to the permitted activity:	
Have you visited the requested area?	□Y □N
The applicant by his or her signature certifies that all the information given is complete and correct, and that no false or misleading information or false statements have been given.	
Signature:	Date:

Note: This is an application only, and does not serve as permission to conduct any special activity in the park. The information provided will be used to determine whether a permit will be issued. Send the completed application to <u>Rocky Mountain National Park Service Attention: Concessions Office</u> at the Park address found on the first page of this application.

If your request is approved, a permit containing applicable terms and conditions will be sent to you. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent before the permitted activity may begin.

Notice to Customers Making Payment by Personal Check: When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

NOTICES

Privacy Act Statement: The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required by this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees and charges by the National Park Service (31 U.S.C. 7701). Information from the application may be transferred to appropriate Federal, State, and local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

Paperwork Reduction Act Statement: We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide the park managers the information needed to decide whether or not to allow the requested use. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 15 minutes per response, including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspect of this form to the Information Collection Clearance Officer, National Park Service, 1849 C Street, NW (1237), Washington, D.C. 20240.

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any matter within its jurisdiction.